REVOCATION OF POWER OF ATTORNEY OR AUTHORIZATION OF AGENT; AND APPOINTMENT OF NEW POWER AND CHANGE OF CORRESPONDENCE ADDRESS

09/873,930
June 4, 2001
Fogarty et al.
2485 CIP CON 5

I hereby revoke all previous powers of attorney or authorizations of agent given in the above-identified application and appoint the following attorney(s) to prosecute and transact all business in the U.S. Patent and Trademark Office connected therewith.

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AND Please change the correspondence address for the above-identified application to:

Firm Name:	United States Surgical,	a Division of	Tyco Health	care Group,	LP
Address	150 Glover Avenue	· · · · · · · · · · · · · · · · · · ·			
Address					
City	Norwalk		;		
Country	US	State	Connecticut	7IP 06856	;
Telephone					
I am the:					
Applicant/Inven	tor.				
Assignee of re Statement unde	cord of the entire Interest. See 37 or 37 CFR 3.73(b) is enclosed. (F	7 CFR 3.71. Form <i>PTO/SB/96</i>)		
	SIGNATURE of Applicant of	r Assignee of Re	cord		
Name ALA	NR. CARLTON, ESO.				
Signature		/			
Date Apri	1 5, 2002				
•					Marine Control
					

DECLARATION Utility Application

As a below named inventor(s), I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled, EXTRALUMINAL BALLOON DISSECTION, the specification of which

Check One	is attached hereto. was filed on	April 11, 1996		as
	Application Serial No.	08/631,221		
	and was amended on	(if applicable)		
ncluding the claims lisclose information Code of Federal Reg tates Code, § 119 o Iso identified below	as amended by any any which is material to the gulations, § 1.56(a). I he of any foreign application	derstand the contents of the nendment(s) referred to about patentability of this applicate ereby claim foreign priority n(s) for patent or inventor's certifications.	ve. I acknowledge ion in accordance v benefits under Title certificate listed belo	e the duty to with Title 37, e 35, United ow and have
Application Numb	er Country	Date of Fill	ing Priority Yes √	Claimed No √
		·		:

I hereby claim the benefit under Title 35, United States Code, §§ 120 and 365 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, § 1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application.

Application Number	Date of Filing	Status-Patented, Pending or Abandoned	
08/267,484	June 29, 1994	Pending	
Sood Correspondence to	LYON & LYON	Direct Telephone Calls to:	

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I further declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements are made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of United States Code, and that such willful false statements may Jeopardize the validity of the application or any patent issuing thereon.

Signature of Inventor . Jose cert	Signature of Invertor 202 Leonge D. Herman
Date 6-119-46	Data 6-15-76
Signeture of Inventor Lewerell	Signature of inventor Ph Man
Dust 6-12-96	names as presented at 201 or out shove.)